

FORM NO. 24Q
(See section 192 and rule 31A)

**Quarterly statement of deduction of tax under sub-section (3) of section 200 of the Income-tax Act, 1961 in respect of salary
for the quarter ended June/September/December/March (tick whichever applicable)_____ (year)**

- | | | | |
|----|---|--|--|
| 1. | (a) Tax Deduction Account No. | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | |
| | | | |
| | (b) Permanent Account No. | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | |
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| | (c) Financial year | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | |
| | | | |
| | (d) Assessment year | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | |
| | | | |
| | (e) Has any statement been filed earlier for this quarter (Yes/No) | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td></tr></table> | |
| | | | |
| | (f) If answer to (e) is 'Yes', then Provisional Receipt No. of original statement | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | |
| | | | |

2. Particulars of the deductor (employer)

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|-----|-------------------------------|---|--|
| (a) | Name | <table border="1" style="width: 100%; height: 40px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | |
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| | | | |
| (b) | Type of deductor ¹ | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | |
| | | | |
| (c) | Branch/Division (if any) | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | |
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| (d) | Address | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | |
| | | | |
| | Flat No. | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | |
| | | | |
| | Name of the premises/building | <table border="1" style="width: 100%; height: 20px;"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> | |
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Road/street/lane

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Area/location

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Town/City/District

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State

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Pin code

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Telephone No.

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E-mail

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3. Particulars of the person responsible for deduction of tax

(a) Name

(b) Address

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Flat No.

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Name of the premises/building

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Road/street/lane

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Area/location

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Town/City/District

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State

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Pin Code

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Telephone No.

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E-mail

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4. Details of tax deducted and paid to the credit of Central Government ?

<i>Sr. No.</i>	<i>TDS Rs.</i>	<i>Surcharge Rs.</i>	<i>Education Cess Rs.</i>	<i>Interest Rs.</i>	<i>Others Rs.</i>
<i>(301)</i>	<i>(302)</i>	<i>(303)</i>	<i>(304)</i>	<i>(305)</i>	<i>(306)</i>

<i>Sr. No.</i>	<i>Total tax deposited Rs. (302+303+ 304+305+306)</i>	<i>Cheque/DD No. (if any)</i>	<i>BSR code</i>	<i>Date on which tax deposited</i>	<i>Transfer voucher/ Challan serial No.²</i>	<i>Whether TDS deposited by book entry? Yes/No³</i>
<i>(301)</i>	<i>(307)</i>	<i>(308)</i>	<i>(309)</i>	<i>(310)</i>	<i>(311)</i>	<i>(312)</i>

5. Details of salary⁴ paid and tax deducted thereon from the employees [(i) Enclose Annexure I along with each quarterly statement having details for the relevant quarter; (ii) Enclose Annexure II along with the last quarterly statement, i.e., for the quarter ending 31st March, having the details for the whole Financial Year.

Verification

I, _____, hereby certify that all the particulars furnished above are correct and complete.

Place :

Signature of person responsible for deducting tax at source

Date :

Name and designation of person responsible for deducting tax at source

Notes :

- (1) Indicate the type of deductor "Government"/"Others".
- (2) Government deductors to give particulars of transfer vouchers; other deductors to give particulars of challan No. regarding deposit into bank.
- (3) Column is relevant only for Government deductors.
- (4) Salary includes wages, annuity, pension, gratuity [other than exempted under section 10(10)], fees, commission, bonus, repayment of amount deposited under the Additional Emoluments (Compulsory Deposit) Act, 1974, perquisites (including value of any other fringe benefit or amenity not covered under Chapter XII-H of the Income-tax Act, 1961), profits in lieu of or in addition to any salary or wages including payments made at or in connection with termination of employment, advance of salary, any payment received in respect of any period of leave not availed [other than exempted under section 10(10AA)], any annual accretion to the balance of the account in a recognised provident fund chargeable to tax in accordance with rule 6 of Part A of the Fourth Schedule of the Income tax Act, 1961, any sums deemed to be income received by the employee in accordance with sub-rule (4) of rule 11 of Part A of the Fourth Schedule of the Income tax Act, 1961, any contribution made by the Central Government to the account of the employee under a pension scheme referred to in section 80CCD or any other sums chargeable to income-tax under the head 'Salaries'.
- (5) Where an employer deducts from the emoluments paid to an employee or pays on his behalf any contributions of that employee to any approved superannuation fund, all such deductions or payments should be included in the statement.
- (5A) Details to be furnished at serial number 4 of the Form and Annexure I shall contain the figures of salary paid and TDS thereon for the relevant quarter.
- (6) Please record on every page the totals of each of the columns.

Annexure I
Deductee-wise break-up of TDS

(Please use separate Annexure for each line - item in the table at
S. No. 04 of main Form 24Q)

Details of salary paid and tax deducted thereon from the employees

BSR code of branch where tax is deposited_	
Date on which tax deposited (dd-mm-yyyy)	
Challan Serial No.	
Section under which payment made	
Total TDS to be allocated among deductees as in the vertical total of col. 323	
Interes	
Others	
Total of the above	

Name of Employer	
TAN	

Sr. No.	Employee reference no. provided by employer	Unique Transaction Number (UTN)	PAN of the employee	Name of employee	Date of payment credit	Taxable amount on which tax deducted Rs.	TDS	Surcharge	Edn. Cess	Total Tax deducted (319+320+321) Rs.	Total Tax deposited Rs.	Date of deduction	Date of Deposit	Reason for non-deduction / lowest deduction*
(313)	(314)	(348)	(315)	(316)	(317)	(318)	(319)	(320)	(321)	(322)	(323)	(324)	(325)	(326)
1														
2														
3														
4														

5														
Total														

Verification

I, _____, hereby certify that all the particulars furnished above are correct and complete.

Place:		Signature of person responsible for deducting tax at source
Date:		Name and designation of person responsible for deducting tax at source

Note.— * Write "A" if "lower deduction" or Write "B" if "no deduction" is on account of a certificate under section 197.

ANNEXURE II

Details of salary paid/credited during the Financial Year _____ and net tax payable

Serial Number	Permanent Account Number (PAN) of the employee	Name of the Employee	Write 'W' for woman, 'S' for senior citizen and 'G' for others	Date from which employed with current employer		Total amount of salary (See note 4 appearing at the end of the main Form)
				Date from	Date To	
327	328	329	330	331		332
Serial Number	Total deduction under section 16(ii) and 16(iii) (specify	Income chargeable under the head "Salaries" (Column 332	Income (including loss from house property) under any	Gross total income (Total of columns 334 and 335)		Aggregate amount of deductions under sections 80C, 80CCC

	each deduction separately)	minus 333)	head other than the head "Salaries" offered for TDS [section 192(2B)]		and 80CCD (Total to be limited to amount specified in section 80CCE)
327	333	334	335	336	337

Serial Number	Amount deductible under any other provision(s) of Chapter VI-A	Total Amount deductible under Chapter VI-A (Total of columns 337 and 338)	Total taxable income (columns 336 minus column 339)	Total tax – (i) income-tax on total income	(ii) surcharge
327	338	339	340	341	342

Serial Number	(iii) education cess	Income tax Relief under section 89, when salary etc., is paid in arrear or in advance	Net tax payable(columns 341+342+343-344)	Total amount of tax deducted at source for the whole year [aggregate of the amount in column 322 of Annexure I for all the four quarters in respect of each employee]	Shortfall in tax deduction(+)/Excess tax deduction(-) [column 345 minus column 346]
327	343	344	345	346	347

Place :

Name and signature of employer/person responsible for paying salary

Date :

Designation